

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1  
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EPAS ID: PAT3556780

<b>SUBMISSION TYPE:</b>	NEW ASSIGNMENT
<b>NATURE OF CONVEYANCE:</b>	ASSIGNMENT
<b>CONVEYING PARTY DATA</b>	
<b>Name</b>	<b>Execution Date</b>
ANTHONY K. MCGROGAN	08/24/2015
THOMAS G. COOPER	08/24/2015
KENT M. ANDERSON	08/23/2015
JEFFREY D. BROWN	08/20/2015
<b>RECEIVING PARTY DATA</b>	
<b>Name:</b>	INTUITIVE SURGICAL OPERATIONS, INC.
<b>Street Address:</b>	1020 KIFER RD.
<b>City:</b>	SUNNYVALE
<b>State/Country:</b>	CALIFORNIA
<b>Postal Code:</b>	94086
<b>PROPERTY NUMBERS Total: 1</b>	
<b>Property Type</b>	<b>Number</b>
<b>Application Number:</b>	14824217
<b>CORRESPONDENCE DATA</b>	
<b>Fax Number:</b>	(408)523-6845
<i>Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.</i>	
<b>Phone:</b>	4085232129
<b>Email:</b>	patent.group@intusurg.com
<b>Correspondent Name:</b>	INTUITIVE SURGICAL OPERATIONS, INC.
<b>Address Line 1:</b>	1020 KIFER RD.
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<b>ATTORNEY DOCKET NUMBER:</b>	ISRG04131/US
<b>NAME OF SUBMITTER:</b>	DANA RUBENSTEIN
<b>SIGNATURE:</b>	/Dana Rubenstein/
<b>DATE SIGNED:</b>	10/05/2015
<b>Total Attachments: 4</b>	
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source=ISRG04131US_Assignment_Signed#page3.tif	



ASSIGNMENT OF INVENTION AND PATENT RIGHTS

WHEREAS I/we:

ANTHONY K. MCGROGAN  
1586 Montalban Dr.  
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THOMAS G. COOPER  
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JEFFREY D. BROWN  
721 Middlefield Road  
California  
94301 Palo Alto

(the "Assignor(s)") have invented one or more inventions described in one or more patent applications entitled (the "Invention"):

ENTRY GUIDE MANIPULATOR WITH A ROLL SYSTEM AND AN INSTRUMENT MANIPULATOR POSITIONING SYSTEM

(i) the application(s) being filed concurrently with this Assignment, in which case I authorize and request an attorney for Intuitive Surgical Operations, Inc. to later insert here the application number and filing date of the application(s) when known: filed, \_\_\_\_\_  
or

(ii) the application(s) having been filed as Application Number: 14/824217, filed on: 12-Aug-2015

ISRG04131/US

PATENT  
REEL: 036731 FRAME: 0003

Now for good and valuable consideration, receipt and sufficiency of which is hereby acknowledged, I/we hereby sell, assign, and transfer to (the "Assignee"),:

Intuitive Surgical Operations, Inc.

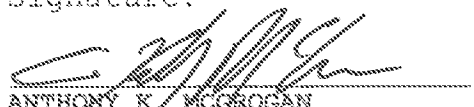
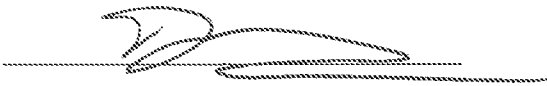
a Delaware corporation having a place of business at 1020 Kifer Road, Sunnyvale, California 94086 and the Assignee's successor(s), assign(s), and nominee(s)-

- (i) the entire right, title, and interest throughout the world in the Invention(s); and
- (ii) the entire right, title, and interest throughout the world in all patent applications and patents of every country and region (including international applications made under the Patent Cooperation Treaty) for the Invention(s), including continuations, divisions, reissues, and extensions thereof, and all rights of priority resulting from the filing of these applications (the "Patent Rights").

I/we authorize the Assignee and the Assignee's successor(s), assign(s), and nominee(s) to apply for patents of every country and region for the Invention(s) and to claim all rights of priority without further authorization from me/us.

I/we agree to execute all papers useful in connection with the Patent Rights, and generally to do everything possible to aid the Assignee, and the Assignee's successor(s), assign(s), and nominee(s), at their reasonable request and reasonable expense, in obtaining and enforcing the Patent Rights in all countries and regions.

I/we request that all patents granted for the Invention(s) be issued to the Assignee or to the Assignee's successor(s), assign(s), and nominee(s) as the case may be.

Signature:  ANTHONY K. MCGROGAN	Witnessed by: 
Date 8/24/15	DOMINIQUE RICHARD Print Name

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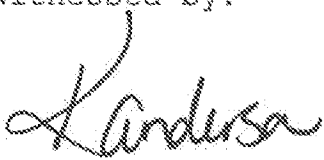
PATENT  
REEL: 036731 FRAME: 0004

Signature: <u>Thomas G. Cooper</u> THOMAS G. COOPER	Witnessed by: <u>[Signature]</u> S. CHEIS ANDERSON
Date <u>8/29/15</u>	Print Name S. CHEIS ANDERSON

Signature: _____	Witnessed by: _____
KENT M. ANDERSON	_____
Date _____	Print Name _____

Signature: <u>[Signature]</u> JEFFREY D. BROWN	Witnessed by: <u>[Signature]</u> Robbie Kolop
Date <u>8/20/15</u>	Print Name Robbie Kolop

Signature:  THOMAS G. COOPER  Date	Witnessed by:    Print Name
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Signature:  KENT M. ANDERSON  Date 8/23/15	Witnessed by:   Print Name Katie Anderson
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Signature:  JEFFREY D. BROWN  Date	Witnessed by:    Print Name
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